

SAFETY INVESTIGATION REPORT (SIR) ENCLOSURE ADVICE TO WITNESS

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| THIS IS PART OF A SAFETY INVESTIGATION LIMITED DISTRIBUTION AND SPECIAL HANDLING REQUIRED BY OPNAVINST 5100.23E THIS STATEMENT IS NOT PRIVILEGED AND MAY BE DISCLOSED | |
| PLEASE READ THIS STATEMENT CAREFULLY CERTIFY THAT YOU UNDERSTAND IT BY YOUR SIGNATURE AT THE BOTTOM | |
| <p>I understand that:</p> <ul style="list-style-type: none"> a. I have been requested to voluntarily provide information to a SIR Board conducting an investigation of a defined Navy shore mishap. b. I AM NOT being requested to provide statement under oath or affirmation. c. Disclosure of personal information by me is voluntary, and that failure to provide such information will have no direct effect on me. d. The purpose of the information provided by me is to determine the cause of a mishap and/or the damage and/or injury occurring in connection with that mishap. e. All information provided by me to the Mishap Board will be used ONLY for safety purposes. It is further understood, however, that the information provided by me or contained in this report may be released in response to a Freedom of Information Act (FOIA) request. f. Although releasable, the information provided by me shall NOT be used by the Government: <ul style="list-style-type: none"> (1) In any determination affecting my interests. (2) As evidence to obtain evidence in determining misconduct or line of duty status of killed or injured personnel. (3) As evidence to determine my responsibility or that of other personnel from the standpoint of discipline. (4) As evidence to assert affirmative claims on behalf of the government. (5) As evidence to determine the liability of the government for property damage caused by the mishap. (6) As evidence before administrative bodies, such as Officer/Enlisted Separation Boards, Judge Advocate General Manual investigations/inquiries. (7) In any other punitive or administrative action taken by the Department of the Navy. In any other investigation or report of the mishap about which I have been asked to provide information (8) My signature acknowledges that I do not need a full Promise of Confidentiality as a condition of my willingness to provide testimony to the Board and I understand that statements given without a Promise of Confidentiality may be released. (If the witness has any reservations about their statement being released to anyone outside the board itself, entitled persons in the safety endorsement process, or the public under FOIA, a Promise of Confidentiality should be offered to ensure forthright, candid testimony.) <p style="text-align: center;"> Witness signature: _____ Date: _____ Initials: _____ </p> | |
| 1. SUMMATION of Witness interview by investigator (Continue on reverse and/or attach separate sheet(s) as necessary) | |
| 2. PRINTED NAME OF INVESTIGATOR (First, Middle, Last) | 3. DATE |
| 4. SIGNATURE | 5. TELEPHONE NUMBER |
| 6. INVESTIGATORS ADDRESS WHERE YOU MAY BE LOCATED | |